275-321 [Rev. 10/18]

MELISSA WILK, Alameda County 2rk-Recorder

1106 Madison Street, Oakland, CA 94607 Telephone: (510) 272-6362

Website: www.acgov.org

EXPIRED BY: MAY 31 2024

MAY 3 1 2019

FICTITIOUS BUSINESS NAME STATEMENT

Pursuant to Business and Professions Code Sections 17900-17930

PLEASE NOTE:

YOU WILL BE REQUIRED TO PRESENT A VALID GOVERNMENT ISSUED PHOTO ID TO FILE THIS STATEMENT IN PERSON.

TYPE OR PRINT LEGIBLY AND FIRMLY IN BLACK OR DARK BLUE INK ONLY

TEMENT	MELISSA WILK, County Clerk
7900-17930	By Deputy
ATEMENT IN PERSON.	ECOUL
FILE NUMBER:	221817

PLEASE READ INSTRUCTIONS ON BA		
A. * Print Fictitious Business Name (please number if more than one business name	ne)	
Be Confident Be You Coaching LLC		
B. ** Street address of principal place of business	Mailing Address, if different	
34904 Herringbone Ct	City State Zip	
City State Zip County Union City, CA 94587 State Zip Alameda	City State Zip	
C. ***REGISTERED OWNER(S): (If more than four owners, attach The Additional I	nformation Form showing owner's information)	
1. Registrant/Corp/LLC Be Confident Be You Coaching LLC	2. Registrant/Corp/LLC	
Residence Address (P.O. Box not accepted) 34904 Herringbone Ct	Residence Address (P.O. Box not accepted)	
City State Zip Union City, CA 94587	City State Zip	
If Corporation or LLC – Print State of Incorporation/Organization California	If Corporation or LLC – Print State of Incorporation/Organization	
3. Registrant/Corp/LLC	4. Registrant/Corp/LLC	
Residence Address (P.O. Box not accepted)	Residence Address (P.O. Box not accepted)	
City State Zip	City State Zip	
If Corporation or LLC – Print State of Incorporation/Organization	If Corporation or LLC – Print State of Incorporation/Organization	
D. ****THIS BUSINESS IS CONDUCTED BY: (Check one) an Individual Married Couple State or local registered I a Joint Venture a General Partnership a Limited Liability Partner a Corporation a Limited Partnership	rship a Trust	
E. *****Insert the date the registrant first commenced to transact business under t	he fictitious business name or names listed above.	
	(Insert N/A if you haven't started to transact business)	
I declare that all information in this A registrant who declares as true any material matter pursuant to misdemeanor punishable by a fine not to	this section that the registrant knows to be false is guilty of a	
F. *****Registrant Lisamaria Martinez		
(Print name) (Corporation, print name and title of officer. If L Registrant Signature	LC, print name and title of officer or manager.)	
(See instructions for au	thorized clanatorios/titles)	

NOTICE: In accordance with subdivision (a) of Section 17920, a fictitious name statement generally expires at the end of five years from the date on which it was filled in the office of the county clerk, except, as provided in subdivision (b) of section 17920, where it expires 40 days after any change in the facts set forth in the statement pursuant to section 17913 other than a change in the residence address of a registered owner. A new fictitious business name statement must be filed before the expiration. The filing of this statement does not of itself authorize the use in this state of a fictitious business name in violation of the rights of another under federal, state, or common law (see Section 14411 et seq., Business and Professions Code).

This statement was filed with the Clerk-Recorder of Alameda County on the date indicated by the filing stamp in the upper right hand corner.

White - Clerk's Copy Yellow Copy - Bank & other Required Needs (Certified) Pink Copy - Newspaper Copy Goldenrod Copy - Registrant's Copy

EXHIBIT